

Form CT-1120SI
Connecticut S Corporation
Information and Composite Income Tax Return**CT-1120SI**
2002

(Rev. 12/02)

See Instructions Before Completing This Form

For calendar year 2002, or other taxable year ▶ beginning _____, 2002, and ▶ ending _____.

Name of Corporation		Federal Employer ID Number	
▶			
Number and Street	PO Box	DRS USE ONLY	
▶		— — 20	
City or Town	State	ZIP Code	Connecticut Tax Registration Number
▶			
Check here if: Amended Return <input type="checkbox"/> Final Return <input type="checkbox"/> Total number of shareholders during the taxable year: Resident ▶ _____ Nonresident ▶ _____			
Change of Address <input type="checkbox"/> (See instructions, Page 12)			

ATTACH A COMPLETE COPY OF FORM 1120S INCLUDING ALL SCHEDULES AS FILED WITH THE INTERNAL REVENUE SERVICE**PART I Schedule A – S Corporation Shareholder Information and Composite Return** (See instructions)

A NONRESIDENT SHAREHOLDER'S NAME		B Connecticut Source Income (See Instructions)	C TAX (Col. B X .045)	D Estimated Tax Paid, If Any	E Interest (Form CT-2210)
1.	▶	▶			
2.	▶	▶			
3.	▶	▶			
4.	▶	▶			
5.	▶	▶			
6.	▶	▶			
7. Subtotal from additional schedules (if needed)					
8. Total Connecticut source income (Add Lines 1 - 7, Column B)					
9. Total composite return tax liability (Add Lines 1 - 7, Column C)					
10. Total estimated tax paid, if any (Add Lines 1 - 7, Column D)					
11. Total interest due (Add Lines 1 - 7, Column E)					

PART I Schedule B – Computation of Composite Return Tax Due

1. Total Connecticut source income of nonresident individual shareholders included in composite return (From Part 1, Schedule A, Line 8, Column B)	▶	1		
2. Tax liability: Multiply Line 1 by 4.5% (.045)	▶	2		
3. Payments of estimated tax, if any (From Part 1, Schedule A, Line 10, Column D)	▶	3		
4. Payment made with extension request	▶	4		
5. Total payments (Add Line 3 and Line 4)	▶	5		
6. If Line 5 is more than Line 2, enter amount overpaid (Subtract Line 2 from Line 5)	▶	6		
7. Amount of Line 6 to be applied to 2003 estimated tax	▶	7		
8. Amount of Line 6 to be refunded (Subtract Line 7 from Line 6)	▶	8		
9. If Line 2 is greater than Line 5, enter amount of tax owed (Subtract Line 5 from Line 2)	▶	9		
10. If late: Enter Penalty (See instructions)	▶	10		
11. If late: Enter Interest (1% (.01) X number of months late, or fraction thereof, X amount on Line 9)	▶	11		
12. Interest on underpayment of estimated tax (Attach Form(s) CT-2210 if applicable)	▶	12		
13. Balance due with this return (Add Lines 9 through 12)	▶	13		

Make check or money order payable to: COMMISSIONER OF REVENUE SERVICES
Mail to: Department of Revenue Services, PO Box 2967, Hartford CT 06104-2967**DECLARATION:** I declare under penalty of law that I have examined this return (including any accompanying schedules and statements) and, to the best of my knowledge and belief, it is true, complete, and correct. I understand that the penalty for willfully delivering a false return to DRS is a fine of not more than \$5,000, or imprisonment for not more than five years, or both. The declaration of a paid preparer other than the taxpayer is based on all information of which the preparer has any knowledge.

SIGN HERE Keep a copy of this return for your records	Signature of Corporate Officer	Date	May DRS contact the preparer shown below about this return? <input type="checkbox"/> Yes <input type="checkbox"/> No (See instructions, Page 13)
	Title	Telephone Number ()	
	Paid Preparer's Signature	Date	Preparer's SSN or PTIN
	Firm's Name and Address	Federal Employer ID Number	Telephone Number ()

Check if you used a paid preparer and do not want forms sent to you next year. ▶ ☐ Checking this box does not relieve you of your responsibility to file.

PART II Income Apportionment (See instructions, Page 14)**Complete this part ONLY
if ALL of the following apply:**

- There are one or more nonresident shareholders; and
- The S corporation carries on business both within and outside Connecticut; and
- The books and records do not satisfactorily disclose the portion of income derived from or connected with Connecticut sources.

		Column A Totals Everywhere	Column B Connecticut Only	Column C Decimal Notation
1. Real property owned	1			Percent Column B is of Column A
2. Real property rented from others	2			
3. Tangible personal property owned or rented	3			
4. Property owned or rented (Add Lines 1, 2, and 3) ..	4			
5. Employee wages and salaries	5			
6. Gross income from sales and services	6			
7. Total (Add Lines 4, 5, and 6, Column C)	7			
8. Apportionment fraction (Divide Line 7 by three or actual number of fractions)	8			

PART III Business Information

Attach schedule to the back of this return listing all places, both within and outside Connecticut, where the S corporation carries on business.

PART IV Shareholder Information

Shareholder # (List nonresidents first, residents next, and other shareholders last)	Federal ID Number or Social Security Number	% Stock Ownership	Nonresident	
			Yes	No
▶ #	▶	▶		
▶ #	▶	▶		
▶ #	▶	▶		

PART V Shareholders' Share of Connecticut Modifications

	SHAREHOLDER		
	▶ #	▶ #	▶ #
ADDITIONS — ENTER ALL AMOUNTS AS POSITIVE NUMBERS			
1. Interest on state and local obligations other than Connecticut	▶	▶	▶
2. Exempt-interest dividends on state and local obligations other than CT	▶	▶	▶
3. Certain deductions relating to income exempt from Connecticut Income Tax	▶	▶	▶
4. Special depreciation allowance for qualified property	▶	▶	▶
5. Other (Specify)	▶	▶	▶
SUBTRACTIONS — ENTER ALL AMOUNTS AS POSITIVE NUMBERS			
6. Interest on U.S. obligations	▶	▶	▶
7. Exempt dividends from certain qualifying mutual funds	▶	▶	▶
8. Certain expenses related to income exempt from federal income tax but subject to Connecticut tax	▶	▶	▶
9. Reserved for future use			
10. Other (Specify)	▶	▶	▶

The S corporation must provide each shareholder with the amounts of Connecticut modifications (as reported in Part V) for inclusion by the shareholder on *Schedule 1 of Form CT-1040*, *Schedule CT-SI of Form CT-1040NR/PY*, or *Schedule A of Form CT-1041*. The S corporation must also provide each nonresident shareholder with information about the portion of the amounts reported in Part V that is Connecticut sourced for inclusion by the shareholder on *Schedule CT-SI of Form CT-1040NR/PY* or *Schedule CT-1041FA of Form CT-1041*.

PART VI Computation of Connecticut Source Income of Nonresident Shareholders

Connecticut-sourced portion of items from federal Schedule K-1 (Form 1120S) (See instructions)	SHAREHOLDER		
	▶ #	▶ #	▶ #
1. Ordinary (nonseparately stated) income (loss)	▶	▶	▶
2. Net income (loss) from rental real estate activities	▶	▶	▶
3. Net income (loss) from other rental activities	▶	▶	▶
4. Portfolio income	▶	▶	▶
5. Expense deduction for property under I.R.C. §179	▶	▶	▶
6. Other deductions	▶	▶	▶
7. Net gain (loss) under I.R.C. §1231 (other than due to casualty or theft) ..	▶	▶	▶
8. Other income (loss) (Attach schedule)	▶	▶	▶

The S corporation must provide each nonresident shareholder with a schedule of amounts of income derived from or connected with sources within Connecticut for inclusion by the shareholder on the appropriate lines of *Schedule CT-SI of Form CT-1040NR/PY* or *Schedule CT-1041FA of Form CT-1041*.